

06-04-07



PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0654-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

Application Number

10/735,340

Filing Date

December 12, 2003

First Named Inventor

Adam GOLD

Art Unit

3734

Examiner Name

M. Mendoza

Attorney Docket Number

506512002100

## ENCLOSURES (Check all that apply)

☒ Fee Transmittal Form + duplicate copy for fee processing – 2 pages

☐ Fee Attached

☒ Amendment/Reply (Restriction Requirement) – 3 pages

☐ After Final

☐ Affidavits/declaration(s)

☒ Extension of Time Request – 1 page

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Reply to Missing Parts/Incomplete Application

☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) \_\_\_\_\_

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify below):

Return Receipt Postcard

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

MORRISON &amp; FOERSTER LLP (Customer No. 25226)

Signature

Printed name

Lisa A. Amii

Date

June 1, 2007

Reg. No.

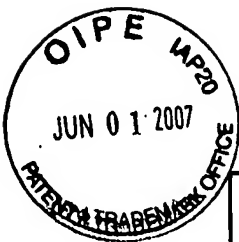
48,199

I hereby certify that this paper is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 377984074 US, on the date shown below in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: June 1, 2007

Signature: \_\_\_\_\_

(Lori Sims)



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		<b>Complete if Known</b>	
		Application Number	10/735,340
		Filing Date	December 12, 2003
		First Named Inventor	Adam GOLD
		Examiner Name	3734
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	M. Mendoza
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)	120.00
		Attorney Docket No.	506512002100

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over-20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**

37    - 37 =    0    x    50.00    =    0.00

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**

9    - 9 =    0    x    200.00    =    0.00

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	250.00	0.00

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x 250.00 = 0.00

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	0.00
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	48,199
Name (Print/Type)	Lisa A. Amii	Telephone	(650) 813-5674
		Date	June 1, 2007